

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Treasure State PAC

ADDRESS (number and street) ▼

3242 Cummins Way

☐ Check if different than previously reported. (ACC)

Missoula

MT

59802

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00433680

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☒ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
12 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mick McKeon

Signature of Treasurer

Mick McKeon

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 29 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Treasure State PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
12		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2015</td></tr></table>	Y	Y	Y	Y	Y	2015						<table><tr><td colspan="5">54196.20</td></tr></table>	54196.20				
Y	Y	Y	Y	Y													
2015																	
54196.20																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">79368.36</td></tr></table>	79368.36															
79368.36																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">53500.00</td></tr></table>	53500.00					<table><tr><td colspan="5">506958.44</td></tr></table>	506958.44									
53500.00																	
506958.44																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">132868.36</td></tr></table>	132868.36					<table><tr><td colspan="5">561154.64</td></tr></table>	561154.64									
132868.36																	
561154.64																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">30655.51</td></tr></table>	30655.51					<table><tr><td colspan="5">458941.79</td></tr></table>	458941.79									
30655.51																	
458941.79																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">102212.85</td></tr></table>	102212.85					<table><tr><td colspan="5">102212.85</td></tr></table>	102212.85									
102212.85																	
102212.85																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Treasure State PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
12	/	01	/	2015

To:

M M	/	D D	/	Y Y Y Y
12	/	31	/	2015

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2500.00

100000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2500.00

100000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

51000.00

400000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

53500.00

500000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

1958.44

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

53500.00

506958.44

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

53500.00

506958.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14655.51	213221.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14655.51	213221.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	214000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000.00
29. Other Disbursements .....	1000.00	30720.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30655.51	458941.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30655.51	458941.79

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	53500.00	500000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	53500.00	499000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	14655.51	213221.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1958.44
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	14655.51	211263.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Treasure State PAC

Full Name (Last, First, Middle Initial)

## **A. Viejas Tribal Government**

Mailing Address 1 Viejas Grade Rd

City State Zip Code  
 Alpine CA 91901-1605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 28 2015

Transaction ID : VR05HEN2T43

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

2500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Treasure State PAC

Full Name (Last, First, Middle Initial)

**A. Aflac Incorporated PAC**
 Mailing Address Worldwide Headquarters  
 1932 Wynnton Rd.

City	State	Zip Code
Columbus	GA	31999-0001

FEC ID number of contributing federal political committee.

C C00034157

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2015

Transaction ID : VR05HEJH863

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 9312 Old Georgetown Rd

City	State	Zip Code
Bethesda	MD	20814-1698

FEC ID number of contributing federal political committee.

C C00008839

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2015

Transaction ID : VR05HEMVKS7

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. CAPITAL GROUP COMPANIES INC POLITICAL ACTION COMMITTEE; THE**

Mailing Address 333 S Hope St

City	State	Zip Code
Los Angeles	CA	90071-1406

FEC ID number of contributing federal political committee.

C C00540518

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR05HENKZK7

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

11500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Treasure State PAC**

Full Name (Last, First, Middle Initial)

## **A. Deloitte Federal Political Action Committee**

Mailing Address 555 12th St NW

City

Washington

State

DC

Zip Code

20004-1200

FEC ID number of contributing  
federal political committee.

C

C00211318

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 09 / 2015

**Transaction ID : VR05HEGN259**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. GENERAL ELECTRIC CO POLITICAL ACTION COMMITTEE**

Mailing Address 1299 Pennsylvania Ave NW  
Ste 900

City

Washington

State

DC

Zip Code

20004-2407

FEC ID number of contributing  
federal political committee.

C

C00024869

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : VR05HEG4RQ5**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Ave NW  
Suite 500 West

City

Washington

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.

C

C00096156

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 04 / 2015

**Transaction ID : VR05HEF5Y35**

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

9500.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 9 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Treasure State PAC**

Full Name (Last, First, Middle Initial)

## **A. IHEARTMEDIA, INC. - CLEAR CHANNEL OUTDOOR PAC**

Mailing Address 200 E Basse Rd

City

San Antonio

State

TX

Zip Code

78209-8328

FEC ID number of contributing  
federal political committee.

C

C00279216

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VR05HENKZM5**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Massachusetts Mutual Life Insurance Co. PAC**

Mailing Address 1295 State St

City

Springfield

State

MA

Zip Code

01111-0001

FEC ID number of contributing  
federal political committee.

C

C00118943

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 15 / 2015

**Transaction ID : VR05HEJH871**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1301 Concord Ter

City

Sunrise

State

FL

Zip Code

33323-2843

FEC ID number of contributing  
federal political committee.

C

C00469205

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 09 / 2015

**Transaction ID : VR05HEGN226**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

11000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 18

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Treasure State PAC

Full Name (Last, First, Middle Initial)

**A. MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMM**Mailing Address 601 Pennsylvania Ave NW  
North Building, Suite 1200

City	State	Zip Code
Washington	DC	20004-2601

FEC ID number of contributing  
federal political committee.

C C00097485

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR05HENKZJ9

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION**Mailing Address 25 Massachusetts Ave NW  
Ste 100

City	State	Zip Code
Washington	DC	20001-1434

FEC ID number of contributing  
federal political committee.

C C00010082

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR05HENKZH1

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Pfizer Inc. PAC**

Mailing Address 235 E 42nd St

City	State	Zip Code
New York	NY	10017-5703

FEC ID number of contributing  
federal political committee.

C C00016683

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2015

Transaction ID : VR05HEMVKV3

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Treasure State PAC**

Full Name (Last, First, Middle Initial)

## **A. Travelers Companies Inc. PAC**

Mailing Address 1 Tower Sq

City

Hartford

State

CT

Zip Code

06183-0002

FEC ID number of contributing  
federal political committee.

C

C00376376

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 22 / 2015

**Transaction ID : VR05HEMJ0Q2**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)**

Mailing Address 9900 Bren Rd E

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing  
federal political committee.

C

C00274431

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2015

**Transaction ID : VR05HEMVKZ5**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. Verizon Communication Inc. Good Government Club**

Mailing Address 1300 I St NW

Ste 400 West

City

Washington

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.

C

C00186288

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VR05HENKZG3**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

9000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

Full Name (Last, First, Middle Initial)

## **A. ZENECA INC. POLITICAL ACTION COMMITTEE**

Mailing Address PO Box 15437

1800 CONCORD PIKE, PO BOX 15437

City

State

Zip Code

Wilmington

DE

19850-5437

FEC ID number of contributing  
federal political committee.

C C00279455

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 30 / 2015

Transaction ID : VR05HEN8BM5

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

51000.00



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Treasure State PAC

### A. American Airlines

Category/  
Type

537.60

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

### B. American Airlines

M M / D D / Y Y Y Y  
12 02 2015

Category/  
Type

25.00

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

### C. Delta Air

Category/  
Type

537.60

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 18

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Air**

Mailing Address PO Box 20706

City Atlanta   State GA   Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:   District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2015
**Transaction ID : VQZ69A4N7J9**

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

\*

Full Name (Last, First, Middle Initial)

**B. Mastercard**

Mailing Address PO Box 31615

City Billings   State MT   Zip Code 59107-1615

Purpose of Disbursement  
Credit card payment(vendors that aggregate over \$200 listed below)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:   District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2015
**Transaction ID : VQZ69A4N7H1**

Amount of Each Disbursement this Period

9.99

Full Name (Last, First, Middle Initial)

**C. Mastercard**

Mailing Address PO Box 31615

City Billings   State MT   Zip Code 59107-1615

Purpose of Disbursement  
Credit card payment(vendors that aggregate over \$200 listed below)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:   District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2015
**Transaction ID : VQZ69A4N7M5**

Amount of Each Disbursement this Period

22.03

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Treasure State PAC

Full Name (Last, First, Middle Initial)

**A. Perkins Coie, LLP**Mailing Address 1201 3rd Ave  
FI 40

City Seattle State WA Zip Code 98101-3029

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 02 2015

Transaction ID : VQZ69A4N715

Amount of Each Disbursement this Period

220.50

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

220.50

14655.26



	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Treasure State PAC

#### A. DSCC Recount Fund



## DSCC Recount Fund

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

15000.00

**B.**

Candidate Name

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

**C.**

Candidate Name

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

15000.00

15000.00

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Treasure State PAC

### A. JWI

Mailing Address 1129 20th St NW  
Ste 801

City	State	Zip Code
Washington	DC	20036-3425

Purpose of Disbursement
Nonfederal contribution

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Transaction ID : VQZ69A4N780

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

1000.00

**TOTAL** This Period (last page this line number only).....